PETITION	FOR EXTENSION OF TIME UNDER	Docket Number (Optional)		
FY 2009			0470 - 060781	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				
Application Number 10/572,239 Filed 9/20/2004  For "Method and Composition for Preventing Multiple Organ Dysfunction Syndrome"				
For Method and Composition for Freventing Multiple Organ Dystunction Syndronic				
Art Unit 1654			Examiner Ronald T. Niebauer	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$130	\$65	\$
	Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$
$\checkmark$	Three months (37 CFR 1.17(a)(3))	\$1110	\$555	<u>\$ 1,110</u>
	Four months (37 CFR 1.17(a)(4))	\$1730	\$865	
	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 23-0650 .				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number 22,132				
attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34				
Wint to trade			April 1, 2010	
Signature			Date	
William H. Logsdon			412-471-8815	
Typed or printed name			Telephor	ne Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
✓ Total		re submitted.		